

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens Acting for Responsible Education Committee

IMPORTANT: Indicate type of committee you are reporting for:

6(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate
(5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee
(8) Support State of Candidates**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Political Party

Office Sought

District (if Senate or House)

**FORM
DR-2**

(Rev. 07/2003)

**DISCLOSURE
REPORT****For Office Use Only**

Comm. #

Logged In

Scanned

Computer

Audited

APR 29 2004

Betty J. Berg
SIGNATURE OF TREASURER (for person filing this report)712-544-2411
TELEPHONE4-28-04
DATE SIGNED

Late filed reports are subject to possible civil and criminal penalties.

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:I AM FILING A 5 days before election REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.
(report date)Indicate one ☒☐ CHECK IF AMENDMENT TO REPORT DATED _____☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a Notice of Dissolution is filed.)

Local Committees, enter Date of Election

May 4, 2004

County & Local Committees, enter County in which Election is held

Pottawattamie**STATEMENT OF CASH ON HAND**CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.) \$ -0-**ADD TOTAL MONEY TAKEN IN THIS PERIOD**Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) \$ 4070⁰⁰

Schedule F: Loans Received total (Attach Schedule F) _____

Schedule H: Total Sales of Campaign Property (Attach Schedule H) _____

(Schedule H applies to Candidates' Committees Only)SUB-TOTAL \$ 4070⁰⁰**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) \$ 2890⁰⁰

Schedule F: Loan Repayments total (Attach Schedule F) _____

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) \$ 1180⁰⁰****UNPAID BILLS** (From Schedule D - Attach Schedule D) \$ _____****IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) \$ _____****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) \$ _____**CANDIDATE COMMITTEES ONLY:****CONSULTANT BREAKDOWN** (Schedule G Attached?) ☐ YES ☐ NO**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H) \$ _____

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)



SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

CITIZENS ACTING FOR RESPONSIBLE EDUCATION

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
4/23/04	ID# CK# N/A	Robert & Catherine Thomas P.O. Box 216 Shelby, IA 51570	N/A	\$ 100 ⁰⁰	<input type="checkbox"/>
4/23/04	ID# CK# N/A	John & Helen Orr P.O. Box 258 Shelby, IA 51570	N/A	200 ⁰⁰	<input type="checkbox"/>
4/23/04	ID# CK# N/A	Mr & Mrs Franklin Paul 3015 Yale Ave. Persim, IA 51563-4078	N/A	400 ⁰⁰	<input type="checkbox"/>
4/23/04	ID# CK# N/A	Janiece Achroder 424 th St F66 Shelby, IA 51570-5504	N/A	100 ⁰⁰	<input type="checkbox"/>
4/23/04	ID# CK# N/A	Richard & Carol Mattori 503 Eastern Ave. Shelby, IA 51570	N/A	200 ⁰⁰	<input type="checkbox"/>
4/23/04	ID# CK# N/A	Robert & Althea Buck 700 West St. Shelby, IA 51570	N/A	25 ⁰⁰	<input type="checkbox"/>
4/23/04	ID# CK# N/A	Ken & Betty Berg 200 Danforth St. Shelby, IA 51570	N/A	250 ⁰⁰	<input type="checkbox"/>
4/23/04	ID# CK# N/A	Paul & Merry Lee Peterson 38653 Diabwood Rd Shelby, IA 51570	N/A	250 ⁰⁰	<input type="checkbox"/>
4/23/04	ID# CK# N/A	Patricia Mortensen 733 - 300 th St. Shelby, IA 51570-5301	N/A	300 ⁰⁰	<input type="checkbox"/>
4/23/04	ID# CK# N/A	Mr & Mrs. Ralph Eggerson 335 Reed MHC Shelby, IA 51570	N/A	200 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 2025 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

CITIZENS ACTING FOR RESPONSIBLE EDUCATION

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTSCHECK THIS BOX IF
AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

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4/23/04	ID# CK# N/A	Larry & Lucy Schlegel 604 Elm Street Shelby, IA 51570	N/A	\$ 200 ⁰⁰	<input type="checkbox"/>
4/23/04	ID# CK# N/A	Linda Wilde 804 Center St Shelby, IA 51570	N/A	100 ⁰⁰	<input type="checkbox"/>
4/23/04	ID# CK# N/A	Ron & Sheila Kroll P.O. Box 51 Shelby, IA 51570	N/A	100 ⁰⁰	<input type="checkbox"/>
4/23/04	ID# CK# N/A	Darlene & Dean Luford P.O. Box 274 Shelby, IA 51570	N/A	200 ⁰⁰	<input type="checkbox"/>
4/23/04	ID# CK# N/A	Roger & Beverly Paul 4126 - 315 th St. Persimmon IA 51563-4037	N/A	100 ⁰⁰	<input type="checkbox"/>
4/24/04	ID# CK# N/A	Keith & Mary Jane Peterson 4121 - 335 th St. Shelby, IA 5157-6000	N/A	200 ⁰⁰	<input type="checkbox"/>
4/24/04	ID# CK# N/A	Lee & Audrey M. Knapp 630 300 th St. Shelby, IA 51570	N/A	100 ⁰⁰	<input type="checkbox"/>
4/24/04	ID# CK# N/A	Ronald & Bonnie Eggers 300 Berden St. Shelby, IA 51570	N/A	200 ⁰⁰	<input type="checkbox"/>
4/26/04	ID# CK# N/A	Tim & Denise Tuel 123 Henke Rd. Shelby, IA 51570-5108	N/A	20 ⁰⁰	<input type="checkbox"/>
4/26/04	ID# CK# N/A	Quane Reed P.O. Box 25 Shelby, IA 51570	N/A	25 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 1245	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

CITIZENS ACTING FOR RESPONSIBLE EDUCATION

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
4/26/04	ID# CK# N/A	Beverly R. Dea 333 Hazel Rd. Shelby, IA 51570-5308	N/A	\$ 100 ⁰⁰	<input type="checkbox"/>
4/26/04	ID# CK# N/A	Oliver A. Tidham 602 Des Moines St. Shelby, IA 51570	N/A	25 ⁰⁰	<input type="checkbox"/>
4/26/04	ID# CK# N/A	Alen & Marlene Hippar 307 Bluff St. P.O. Box 161 Shelby, IA 51570	N/A	50 ⁰⁰	<input type="checkbox"/>
4/27/04	ID# CK# N/A	Richard & Karen Brockmann 505 Platinum Bk 303 Shelby, IA 51570	N/A	100 ⁰⁰	<input type="checkbox"/>
4/27/04	ID# CK# N/A	Linda Jacobson 31218 Hwy 59 Quincy, IA 51521	N/A	5 ⁰⁰	<input type="checkbox"/>
4/27/04	ID# CK# N/A	Darlene Schuster 319 Hazel Rd. Shelby, IA 51570	N/A	20 ⁰⁰	<input type="checkbox"/>
4/27/04	ID# CK# N/A	Douglas & Marcus Robinson 502 Elmwood Rd. Shelby, IA 51570-5103	N/A	50 ⁰⁰	<input type="checkbox"/>
4/27/04	ID# CK# N/A	Thomas & Joyce Rihner 816 St F-66 Shelby, IA 51570-5408	N/A	50 ⁰⁰	<input type="checkbox"/>
4/27/04	ID# CK# N/A	Lu Gene Bakrene PO Box 167 Shelby, IA 51570	N/A	200 ⁰⁰	<input type="checkbox"/>
4/27/04	ID# CK# N/A	Jon & Linda Kirkpatrick 29493 Hwy 59 Quincy, IA 51521-2099	N/A	200 ⁰⁰	<input type="checkbox"/>

SUB-TOTAL

\$ 800

TOTAL (if last page of this schedule)

\$ 4070

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

CITIZENS ACTING FOR RESPONSIBLE EDUCATION

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
4/24/04	ID# CK# N/A	DORR CONSULTING SERVICES P.O. Box 188 OCHLEYEDAN, IA 51354	PART OF CONSULTING FEES	\$2500 ⁰⁰
4/26/04	ID# CK# N/A	DORR CONSULTING SERVICES P.O. Box 188 OCHLEYEDAN, IA 51354	BALANCE OF CONSULTING FEES	290 ⁰⁰
4/28/04	ID# CK# N/A	BETTY BERG 200 DAVENPORT ST SHELBY, IA 51570	REIMBURSEMENT FOR POSTAGE	20 ⁰⁰
4/28/04	ID# CK# N/A	DORR CONSULTING P.O. Box 188 OCHLEYEDAN, IA 51354	RADIO PRODUCTION EXPENSES	80 ⁰⁰
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$
TOTAL (If last page of this schedule)				\$2890

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.6(3)(i).)

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(for Schedule B)